

PROPERTY LOCATION

|    |        |                        |
|----|--------|------------------------|
| No | Alt No | Direction/Street/City  |
| 23 |        | FRANKLIN ST, ARLINGTON |

OWNERSHIP

|           |                     |                   |
|-----------|---------------------|-------------------|
| Owner 1:  | ZULUAGA JUAN CARLOS |                   |
| Owner 2:  | BULA DIANA VICTORIA |                   |
| Owner 3:  |                     |                   |
| Street 1: | 23 FRANKLIN ST      |                   |
| Street 2: |                     |                   |
| Twn/City: | ARLINGTON           |                   |
| St/Prov:  | MA                  | Cntry: Own Occ: Y |
| Postal:   | 02474               | Type:             |

PREVIOUS OWNER

|           |                       |
|-----------|-----------------------|
| Owner 1:  | ZULUAGA JUAN CARLOS - |
| Owner 2:  | -                     |
| Street 1: | 23 FRANKLIN ST        |
| Twn/City: | ARLINGTON             |
| St/Prov:  | MA                    |
| Postal:   | 02474                 |

NARRATIVE DESCRIPTION

This parcel contains Sq. Ft. of land mainly classified as Condo with a Condo TnHs. Building built about 2015, having primarily Vinyl Exterior and 1800 Square Feet, with 1 Unit, 2 Baths, 0 3/4 Bath, 1 HalfBath, 6 Rooms, and 3 Bdrms.

OTHER ASSESSMENTS

| Code | Descrip/No | Amount | Com. Int |
|------|------------|--------|----------|
|      |            |        |          |
|      |            |        |          |
|      |            |        |          |

PROPERTY FACTORS

| Item       | Code | Description | %   | Item    | Code | Description |
|------------|------|-------------|-----|---------|------|-------------|
| Z          | R2   | TWO FAMIL   | 100 | water   |      |             |
| o          |      |             |     | Sewer   |      |             |
| n          |      |             |     | Electri |      |             |
| Census:    |      |             |     | Exmpt   |      |             |
| Flood Haz: |      |             |     |         |      |             |
| D          |      |             |     | Topo    |      |             |
| s          |      |             |     | Street  |      |             |
| t          |      |             |     | Gas:    |      |             |

LAND SECTION (First 7 lines only)

| Use Code | Description | LUC Fact | No of Units | Depth/ PriceUnits | Unit Type | Land Type | LT Factor | Base Value | Unit Price | Adj  | Neigh | Neigh Infl | Neigh Mod | Infl 1 | % | Infl 2 | % | Infl 3 | % | Appraised Value | Alt Class | % | Spec Land | J Code | Fact | Use Value | Notes |
|----------|-------------|----------|-------------|-------------------|-----------|-----------|-----------|------------|------------|------|-------|------------|-----------|--------|---|--------|---|--------|---|-----------------|-----------|---|-----------|--------|------|-----------|-------|
| 102      | Condo       |          | 0           |                   | Sq. Ft.   | Site      |           | 0          | 0.         | 0.00 | 8300  |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |
|          |             |          |             |                   |           |           |           |            |            |      |       |            |           |        |   |        |   |        |   |                 |           |   |           |        |      |           |       |

IN PROCESS APPRAISAL SUMMARY

| Use Code                | Land Size | Building Value                        | Yard Items | Land Value     | Total Value | Legal Description | User Acct |
|-------------------------|-----------|---------------------------------------|------------|----------------|-------------|-------------------|-----------|
| 102                     | 0.000     | 788,300                               |            |                | 788,300     |                   | 318540    |
|                         |           |                                       |            |                |             |                   | GIS Ref   |
|                         |           |                                       |            |                |             |                   | GIS Ref   |
| Total Card              | 0.000     | 788,300                               |            |                | 788,300     | Entered Lot Size  |           |
| Total Parcel            | 0.000     | 788,300                               |            |                | 788,300     | Total Land:       |           |
| Source: Market Adj Cost |           | Total Value per SQ unit /Card: 437.94 |            | /Parcel: 437.9 |             | Land Unit Type:   |           |

PREVIOUS ASSESSMENT

| Tax Yr | Use | Cat | Bldg Value | Yrd Items | Land Size | Land Value | Total Value | Asses'd Value | Notes         | Date       |
|--------|-----|-----|------------|-----------|-----------|------------|-------------|---------------|---------------|------------|
| 2020   | 102 | FV  | 774,200    | 0         | .         |            | 774,200     | 774,200       | Year End Roll | 12/18/2019 |
| 2019   | 102 | FV  | 756,800    | 0         | .         |            | 756,800     | 756,800       | Year End Roll | 1/3/2019   |
| 2018   | 102 | FV  | 688,200    | 0         | .         |            | 688,200     | 688,200       | Year End Roll | 12/20/2017 |

SALES INFORMATION

| Grantor         | Legal Ref | Type | Date      | Sale Code   | Sale Price | V  | Tst | Verif | Notes                 |
|-----------------|-----------|------|-----------|-------------|------------|----|-----|-------|-----------------------|
| ZULUAGA JUAN CA | 75346-175 | 2    | 8/12/2020 | Convenience |            | 1  | No  | No    |                       |
| AGRAWAL MANISH  | 75274-386 | 2    | 7/31/2020 |             | 887,000    | No | No  |       |                       |
| RJJJ LLC,       | 66856-375 |      | 2/26/2016 |             | 770,000    | No | No  |       | Master Deed 66812:154 |

BUILDING PERMITS

| Date | Number | Descrip | Amount | C/O | Last Visit | Fed Code | F. Descrip | Comment |
|------|--------|---------|--------|-----|------------|----------|------------|---------|
|      |        |         |        |     |            |          |            |         |
|      |        |         |        |     |            |          |            |         |
|      |        |         |        |     |            |          |            |         |
|      |        |         |        |     |            |          |            |         |
|      |        |         |        |     |            |          |            |         |
|      |        |         |        |     |            |          |            |         |
|      |        |         |        |     |            |          |            |         |
|      |        |         |        |     |            |          |            |         |
|      |        |         |        |     |            |          |            |         |

ACTIVITY INFORMATION

| Date      | Result       | By  | Name    |
|-----------|--------------|-----|---------|
| 9/9/2020  | SQ Mailed    | JO  | Jenny O |
| 7/11/2018 | Measured     | DGM | D Mann  |
| 6/8/2016  | Meas/Inspect | PT  | Paul T  |

Sign: VERIFICATION OF VISIT NOT DATA



USER DEFINED

|                |       |
|----------------|-------|
| Prior Id # 1:  | 29141 |
| Prior Id # 2:  |       |
| Prior Id # 3:  |       |
| Prior Id # 1:  |       |
| Prior Id # 2:  |       |
| Prior Id # 3:  |       |
| Prior Id # 1:  |       |
| Prior Id # 2:  |       |
| Prior Id # 3:  |       |
| ASR Map:       |       |
| Fact Dist:     |       |
| Reval Dist:    |       |
| Year:          |       |
| LandReason:    |       |
| BldReason:     |       |
| CivilDistrict: |       |
| Ratio:         |       |

